



TESTOMONY: Bill 366 An Act to raise rates for Adult Day Care/ Addendum PCA Services

Good Morning Representative Tallarita, Senator Prague, Senator Cook, Senator Kelly and esteemed Aging Committee members, my name is Joy Mason and I am here today to testify in favor of HB# 366 to increase the daily rate of Adult Day Cares. I am a master's prepared registered nurse in public health nursing as well as a nationally certified care manager for the Felician Sisters in Enfield Connecticut.

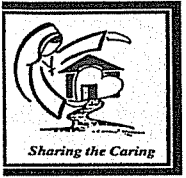
I ask that an addendum be added to this bill in that all specialty adult day cares are allowed by the Department of Social Services to provide pre and post daycare personal care assistant services to enrolled daycare clients. In this addendum I propose that personal care assistants assigned by a specialty adult day care must show training provided by a registered nurse per the Department of Public Health's standards. Currently the Department of Social Services has proposed that personal care assistant services be client led which is a innovative solution to the need for expanded direct care work force development, but I would ask these legislators to include family led and nurse led personal care assistants hired and trained by the adult day care to be included in that expanded work force.

I am the director of clinical services of the Felician Adult Day Care which has specialized in Alzheimer/dementia care for over 20 years. Our staff in the center has received the 100 hours required by the Department of Public Health in their certified nursing assistant curriculum as well as the additional 12 + hours in-service devoted to the specialty of Alzheimer/dementia care. I also specialize in dementia care and personally developed the curriculum required by the State of Connecticut with an Alzheimer/dementia care theme that was woven throughout the curriculum.

The interdisciplinary team at the center consists of a medical director, psychiatric nurse practitioner, LCSW, an LPN spiritual advisor, and multiple other specialists that we use for our community referrals in dementia care. Our staff has access to these specialists on a continuous basis.

Currently the access agency in charge of the personal care assistant role out by the Department of Social Services(DSS) had 150 applications last year and 80 more applications this year and are carefully reviewing each application for client safety. This application review process is honorable but currently puts the adult day cares who have already met DSS standards of staff training and peer review in the same category as a brand new homemaker companion agency that has yet to prove safe effective community care.

Today I am only asking that if an adult day care wishes to expand its services to include personal care assistants that will help families get their loved ones to day care or stay with their



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loved ones until a family member comes home from work that they be allowed to do so without being lumped into the same category as a brand new homemaker, companion business applying for state reimbursed PCA services. If allowed to provide these additional services the client and family will benefit from a more coordinated, continuity of caregivers based at the ADC.

Joy Mason RN, MSN, CMC

Director of Clinical Services

Felician Adult Day Care

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www.felicianadultdaycare.org

www.dementiacaremanagement.com

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The story of Maggie:

Maggie suffered from advanced kidney disease and needed to begin dialysis. Maggie was placed for rehabilitation in a nursing home, she became severely depressed and her husband decided to bring her home. They privately pay for homemaker and companion services. During the one year she was at home spending down her finances as the State of Connecticut recommended for Medicaid eligibility she developed a condition known as "drop foot" which happens when her ligaments stretched forward in a ballerina type position which could permanently affect her ability to ever walk again. This condition is from lack of exercising the ligaments from prolonged bed rest. The homemakers and companions she had coming from this independent agency lacked nursing oversight and failed to recognize this reversible condition. She became totally dependent on a mechanical lift for transferring from bed to her favorite recliner.

Maggie called the Felician Adult Day Care (FADC) stating she needed to do something productive in her life and felt trapped at home. She knew Sister Patricia and had known about the high quality of care that FADC could provide, but said she would have trouble getting to the daycare because she could not walk.

As a registered nurse and the director of clinical care for FADC, I talked to Maggie understood the complexity of her care and decided to do a home visit. I did an assessment per OASIS Medicare standards and interviewed her and her spouse to determine their imminent needs. It was at this time I discovered the reversible condition of "drop foot". I immediately phoned the physician and advised him of her condition and developed a nursing plan of care. Drop foot is an old adversary of nursing and as a nurse, I was able to advise the family that Maggie only needed gentle stretching and to begin to wear sneakers at night or during the day for about 8 hours to gently stretch and hold her ligaments in a flatter walking type position. I also had a brace made by a prosthetics company with the doctor's order to support the arch of her foot when attempting to stand, and VNA services provided physical therapy in her home. Maggie now tells me after 6 months of gentle message and stretching from a homemaker provided by FADC that is in her home daily helping her get ready for daycare that she now has walked with a walker three steps.

Maggie thrives in our daycare and takes a leadership position when helping folks with cognitive impairment. Maggie is paying privately for her beloved aide from FADC and has been determined to be eligible for the Connecticut Home Care for elders program. Her beloved morning aide is not covered by this Medicaid program because the access agency subcontracted by the Department of Social services has been inundated with applications from every mom and pop homemaker companion agency in the state totaling 180 applications last year and 80 applications this year and must follow the application process designed by DSS for introduction of home and companion agencies.

I ask that a law be created allowing Adult Day Cares to provide homemaker, companion, and personal care assistant services for their enrolled clients after submitting the paperwork required by the access agency and be reimbursed for these services under the current Medicaid structure in this state bypassing the long waiting list that has inundated the access agency

thereby supporting a continuity of care and weekly nursing oversight for adult day care enrolled clients.

Peace,

Joy

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New adult day care blog:

www.susantrappe.wordpress.com